General Optical Council

| ANGLIA RUSKIN UNIVERSITY |
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| GOC QUALITY ASSURANCE VISIT |
| FOUNDATION DEGREE IN OPHTHALMIC DISPENSING |
| 3 and 4 April 2019 |

| | |
| :--- | :--- |
| **Date report completed** | 10 April 2019 |
| **Report confirmed by GOC** | Click or tap to enter a date. |

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# PART 1 – VISIT DETAILS

| 1.2 PROGRAMME DETAILS | |
|---|---|
| Programme title | Ophthalmic Dispensing (Registrable Award) |
| Programme type | FdSc Foundation Degree |
| Current approval status | Full Approval |
| Approved/current student numbers | 60 |

| 1.3 GOC EDUCATION VISITOR PANEL | |
|---|---|
| Chair | Sally Powell Lay Chair |
| Visitors | Christine Harm, Dispensing Optician and Contact Lens Optician<br>Brendan Barrett, Optometrist.<br>Jane Andrews, Lay Member. |
| GOC representative | Shaun de Riggs, Approval and Quality Assurance Officer |
| Observers | N/A |

| 1.4. PURPOSE OF THE VISIT | |
|---|---|
| Visit type | Quality Assurance Visit |

The purpose of this visit was to quality assure the programme being recommended for full approval by the Panel at the last visit on 18 and 19 April 2016. In order to make this visit process more efficient and targeted, this visit process was made up of three separate visits. On 9 January 2019, a Sub Panel (Sally Powell and Christine Harm, accompanied by Shaun de Riggs) attended the OSCEs assesments at ARU and on 28 and 29 January 2019 a Sub Panel (Sally Powell and Maryna Hura, accompanied by Shaun de Riggs) reviewed a sample of students' portfolios and written assignments, met the External Examiners to the programme and attended an Exam Board/Assessment meeting at ARU.

The final visit on 3 and 4 April 2019 completed the two Sub Panel meetings, taking into account the visit documentation of the above mentioned visits and the usual quality assurance meetings (EVP meetings with the Programme staff, students, Supervisors, tour of the facilities, etc.) that occur on a typical two day EVP visit.

| 1.5 PROGRAMME VISIT HISTORY | | |
|---|---|---|
| Set out a chronology of the key events affecting the programme in the last FIVE years, including any visits and key events. | | |
| Date | Event type | Overview |
| 10/01/2014 | Visit | GOC visit to observe OSCEs for the FdSc Ophthalmic Dispensing programme. |
| 02/04/2015 | Visit | GOC follow up visit to ARU for an update on the development of the programme. |
| 19/04/2016 | Visit | GOC visit - full approval recommended by the Panel. |
| 09/01/2019 | Visit | Sub Panel OSCEs observation visit for the programme. |
| 29/01/2019 | Visit | Sub Panel visit to review a sample of students' portfolios and written assignments, External Examiners and attend the Exam Board/Assessment Panel meeting. |

# PART 2 – VISIT SUMMARY

| 2.1 Visit outcomes | |
|---|---|
| The Panel recommended that approval for the FdSc Ophthalmic Dispensing programme should continue, with the next quality assurance visit taking place in five years time. | |
| **Summary of recommendations to the GOC** | |
| **Previous condition/s – met** | See 2.2 |
| **New conditions** | None |
| **New recommendations** | 2 |
| **Commendations** | 3 |
| **Student numbers** | 60 |
| **Approval/next visit** | Recommended for approval for five years. |
| **Factors to consider when scheduling next visit e.g. when students are in, hospital, audit etc.** | The next visit should include a visit to observe the OSCEs, attend the relevant Exam Board meeting at ARU, a meeting with the External Examiners to the programme and a final university visit. |

| 2.2 Previous conditions | | | | |
|---|---|---|---|---|
| The conditions listed below are extracted from the report of 26 May 2016 | | | | |
| **Ref No.** | **Condition** | **Requirement number** | **Due date** | **Met?** |
| 1 | The Department must ensure that a robust system is in place to demonstrate that all persons responsible for the signing off of competencies are suitably qualified and on the GOC Dispensing Opticians or Optometry registers. | N/A | **24 May 2016** | ☒ **Yes** <br> ☐ **No** |

| 2.3 Previous recommendations | |
|---|---|
| The recommendations listed below are extracted from the report of 26 May 2016 | |
| **Description** | **Comments** |
| 1. The panel encourage further development of the Portfolio verification process. <br> 2. The panel encourage improvement to the mapping of core competencies to the learning outcome of the modules. <br> 3. The panel would like to see a clearer audit trail for the sign off of the core competencies. | Please refer to 2.6 below. |

## 2.4 Conditions set at this visit

Conditions are applied to training and assessment providers if there is evidence that the GOC requirements are not met.

**There were no unmet requirements at this visit and therefore no conditions set**.

## 2.5 Recommendations made at this visit

The Panel offers the following recommendation(s) to the provider. Recommendations indicate enhancements that can be made to a programme but are not directly linked to compliance with GOC requirements.

| Ref. | Description |
|---|---|
| **1.** | Consideration is given to the appointment of additional technical support. <br><br> Rationale: The programme appears over-reliant on an individual (Technician/Senior Technician) and would benefit from additional appointment. |
| **2.** | All future annual monitoring submissions to the General Optical Council must provide component marks for each element of the assessment in each module that together make up the final module mark (external examiner input required). <br><br> Rationale: The Panel were informed of the internal university mechanisms concerning module marks that are higher or lower than expected, which appear satisfactory. However, The Panel and external examiners identified high average marks across a number of modules, particularly where MCQs are in use. |
| **3.** | The University continues to monitor and develop its policies and processes for effective communications with practice supervisors. <br><br> Rationale: A small number of supervisors were lacking in information about their role, regarding the support of students, and liaison with the University and would benefit from improvements to communication. |

## 2.6 Commendations

The Panel identifies the following areas of good practice where the programme exceeds GOC requirements for approval.

1. The overall positive student experience, which was evident to the Panel throughout this visit.

   Rationale: The Panel spoke to numerous students, face to face and by telephone, during the visit and were informed by them that there is high quality and consistent support for students, which they value greatly. The Panel noted that overall, this further enhanced the student learning environment.

2. Leadership of the department and the programme and the Panel noted the strong and collegiate spirit exhibited by the staff.

   Rationale: The Panel noted the implementation of effective change management in challenging circumstances, evidence of high morale and the commitment to continuing programme delivery and development.

3. The programme is a good model of integration of practice and theory.

   Rationale: The Panel observed that the student learning outcomes and GOC core competencies for the programme are clearly set out for both theoretical and practical experience. The Panel also noted that blended learning, supervision of practice and the overarching approaches to learning are cohesive and well embedded.